

Comments

This report was filed late because MYL PAC has been considering whether, when, and how to hire the treasurer. This has caused some difficulties and delays with accounting, due to the treasurer's conflict of interest on this question and issues relating to a possible first-time hire.

Neither MYL PAC's treasurer nor vice-treasurer are full time employees, and both have been unavoidably busy due to other obligations.

As this is the first time MYL PAC has been late in filing, MYL PAC has not engaged in any advertising or other such activity (only costs of operation), and MYL PAC has a very small budget, we ask that no penalty be imposed.

Sincerely,

/s/ Sai

Treasurer, MYL PAC

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Make Your Laws P.A.C., Inc. (MYL P.A.C.)

ADDRESS (number and street)

500 Westover Dr #8458

☐ Check if different
than previously
reported. (ACC)

Durham

N.C.

27330

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C 0 0 5 2 9 7 4 3

3. IS THIS
REPORT



NEW
(N)

OR



AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15
Quarterly Report (Q1)
- ☒ July 15
Quarterly Report (Q2)
- ☐ October 15
Quarterly Report (Q3)
- ☐ January 31
Year-End Report (YE)
- ☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)
- ☐ Termination Report
(TER)

(b) Monthly
Report
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)
(Non-Election
Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)
(Non-Election
Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

MM / DD / YYYY

in the
State of

State

(d) 30-Day
POST-Election
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

MM / DD / YYYY

in the
State of

State

5. Covering Period

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

through

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Sai

Signature of Treasurer

Sai

Date

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only

FEC FORM 3X
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Make Your Laws PAC, Inc. (MYL PAC)

Report Covering the Period: From:

MM	DD	YYYY
04	01	2016

 To:

MM	DD	YYYY
06	30	2016

COLUMN A
This Period

COLUMN B
Calendar Year-to-Date

6. (a) Cash on Hand January 1,	<table border="1"><tr><td>YYYYYY</td></tr><tr><td>2016</td></tr></table>	YYYYYY	2016	<table border="1"><tr><td>DD</td><td>DD</td><td>DD</td><td>DD</td><td>DD</td><td>DD</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>	DD	DD	DD	DD	DD	DD																
YYYYYY																										
2016																										
DD	DD	DD	DD	DD	DD																					
(b) Cash on Hand at Beginning of Reporting Period.....	<table border="1"><tr><td>DD</td><td>DD</td><td>DD</td><td>DD</td><td>DD</td><td>DD</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>	DD	DD	DD	DD	DD	DD							<table border="1"><tr><td>DD</td><td>DD</td><td>DD</td><td>DD</td><td>DD</td><td>DD</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>	DD	DD	DD	DD	DD	DD						
DD	DD	DD	DD	DD	DD																					
DD	DD	DD	DD	DD	DD																					
(c) Total Receipts (from Line 19)	<table border="1"><tr><td>DD</td><td>DD</td><td>DD</td><td>DD</td><td>DD</td><td>DD</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>	DD	DD	DD	DD	DD	DD							<table border="1"><tr><td>DD</td><td>DD</td><td>DD</td><td>DD</td><td>DD</td><td>DD</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>	DD	DD	DD	DD	DD	DD						
DD	DD	DD	DD	DD	DD																					
DD	DD	DD	DD	DD	DD																					
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<table border="1"><tr><td>DD</td><td>DD</td><td>DD</td><td>DD</td><td>DD</td><td>DD</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>	DD	DD	DD	DD	DD	DD							<table border="1"><tr><td>DD</td><td>DD</td><td>DD</td><td>DD</td><td>DD</td><td>DD</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>	DD	DD	DD	DD	DD	DD						
DD	DD	DD	DD	DD	DD																					
DD	DD	DD	DD	DD	DD																					
7. Total Disbursements (from Line 31)	<table border="1"><tr><td>DD</td><td>DD</td><td>DD</td><td>DD</td><td>DD</td><td>DD</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>	DD	DD	DD	DD	DD	DD							<table border="1"><tr><td>DD</td><td>DD</td><td>DD</td><td>DD</td><td>DD</td><td>DD</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>	DD	DD	DD	DD	DD	DD						
DD	DD	DD	DD	DD	DD																					
DD	DD	DD	DD	DD	DD																					
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table border="1"><tr><td>DD</td><td>DD</td><td>DD</td><td>DD</td><td>DD</td><td>DD</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>	DD	DD	DD	DD	DD	DD							<table border="1"><tr><td>DD</td><td>DD</td><td>DD</td><td>DD</td><td>DD</td><td>DD</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>	DD	DD	DD	DD	DD	DD						
DD	DD	DD	DD	DD	DD																					
DD	DD	DD	DD	DD	DD																					
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<table border="1"><tr><td>DD</td><td>DD</td><td>DD</td><td>DD</td><td>DD</td><td>DD</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>	DD	DD	DD	DD	DD	DD							<table border="1"><tr><td>DD</td><td>DD</td><td>DD</td><td>DD</td><td>DD</td><td>DD</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>	DD	DD	DD	DD	DD	DD						
DD	DD	DD	DD	DD	DD																					
DD	DD	DD	DD	DD	DD																					
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<table border="1"><tr><td>DD</td><td>DD</td><td>DD</td><td>DD</td><td>DD</td><td>DD</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>	DD	DD	DD	DD	DD	DD							<table border="1"><tr><td>DD</td><td>DD</td><td>DD</td><td>DD</td><td>DD</td><td>DD</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>	DD	DD	DD	DD	DD	DD						
DD	DD	DD	DD	DD	DD																					
DD	DD	DD	DD	DD	DD																					

☐ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

410102200000112400

Page 4

COLUMN B
Calendar Year-to-Date

-

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Ex- penditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)		
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)		
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	5 0 8 1 9	7 2 7 4 4
37. Offsets to Operating Expenditures (from Line 15, page 3).....		
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	5 0 8 1 9	7 2 7 4 4

41010220000001082400

41010220000001082400



SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1 OF 1

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Make Your Laws PAC, Inc. (MYL PAC)

Full Name (Last, First, Middle Initial)

A. Wells Fargo

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M /

D D /

Amount of Each Receipt this Period

0 0 5

Total interest over period

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M /

D D /

Amount of Each Receipt this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M /

D D /

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶

0 0 5

TOTAL This Period (last page this line number only).....▶

0 0 5

41010220000001072400

41010220000001072400

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1 OF 6

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Make Your Laws PAC, Inc. (MYL PAC)

Full Name (Last, First, Middle Initial)

A. Google

Mailing Address

City State Zip Code

Purpose of Disbursement

Collaboration services

Candidate Name

0 0 1
Category/
Type

Date of Disbursement

0 4 / 0 4 / 2 0 1 6

Amount of Each Disbursement this Period

3 6 6 6

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. Traveling Mailbox

Mailing Address

City State Zip Code

Purpose of Disbursement

Mail receiving agent

Candidate Name

0 0 1
Category/
Type

Date of Disbursement

0 4 / 0 4 / 2 0 1 6

Amount of Each Disbursement this Period

8 0 0

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. Business Quicken Banking

Mailing Address

City State Zip Code

Purpose of Disbursement

Electronic access to bank records

Candidate Name

0 0 1
Category/
Type

Date of Disbursement

0 4 / 0 8 / 2 0 1 6

Amount of Each Disbursement this Period

9 9 5

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

NOTATION: NO DISBURSEMENTS

4101022000001062400

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 2 OF 6

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Make Your Laws PAC, Inc. (MYL PAC)

Full Name (Last, First, Middle Initial)

A. Traveling Mailbox

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Mail receiving agent

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY
05 / 03 / 2016

Amount of Each Disbursement this Period

800

B. Google

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Collaboration services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY
05 / 04 / 2016

Amount of Each Disbursement this Period

3666

C. Business Quicken Banking

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Electronic access to bank records

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY
05 / 09 / 2016

Amount of Each Disbursement this Period

995

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

20160504 10:00:00 AM

41010220000001052400

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER:
 (check only one)

PAGE **3** OF **6**

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Make Your Laws PAC, Inc. (MYL PAC)

Full Name (Last, First, Middle Initial)

A. Namecheap

Mailing Address

City State Zip Code

Purpose of Disbursement
 Domain names

Candidate Name

0 0 1
 Category/
 Type

Date of Disbursement

05 / 16 / 2016

Amount of Each Disbursement this Period

3 6 4 1

Office Sought: ☐ House
☐ Senate
☐ President
 State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

B. Delaware

Mailing Address

City State Zip Code

Purpose of Disbursement
 Annual report fee

Candidate Name

0 0 1
 Category/
 Type

Date of Disbursement

06 / 01 / 2016

Amount of Each Disbursement this Period

4 9 0 0

Office Sought: ☐ House
☐ Senate
☐ President
 State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

C. Traveling Mailbox

Mailing Address

City State Zip Code

Purpose of Disbursement
 Mail receiving agent

Candidate Name

0 0 1
 Category/
 Type

Date of Disbursement

06 / 02 / 2016

Amount of Each Disbursement this Period

8 0 0

Office Sought: ☐ House
☐ Senate
☐ President
 State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

41010220000001042400

41010220000001042400

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 4 OF 6

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
27 28a 28b 28c 29 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Make Your Laws PAC, Inc. (MYL PAC)

Full Name (Last, First, Middle Initial)

A. A Registered Agent

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Registered agent

Candidate Name

0 0 1

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

0 6 / 0 2 / 2 0 1 6

Amount of Each Disbursement this Period

4 9 0 0

B. Faxaway

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Fax receiving agent

Candidate Name

0 0 1

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

0 6 / 0 3 / 2 0 1 6

Amount of Each Disbursement this Period

1 0 0 0

C. Google

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Collaboration services

Candidate Name

0 0 1

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

0 6 / 0 3 / 2 0 1 6

Amount of Each Disbursement this Period

3 6 6 6

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

41010220000001032400

41010220000001032400

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER:
 (check only one)

PAGE 5 OF 6

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Make Your Laws PAC, Inc. (MYL PAC)

Full Name (Last, First, Middle Initial)

A. Business Quicken Banking

Mailing Address

City State Zip Code

Purpose of Disbursement
 Electronic access to bank records

Candidate Name

0 0 1
 Category/
 Type

Office Sought: ☐ House
☐ Senate
☐ President
 State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

0 6 / 0 8 / 2 0 1 6

Amount of Each Disbursement this Period

9 9 5

B. Traveling Mailbox

Mailing Address

City State Zip Code

Purpose of Disbursement
 Mail receiving agent

Candidate Name

0 0 1
 Category/
 Type

Office Sought: ☐ House
☐ Senate
☐ President
 State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

0 6 / 1 4 / 2 0 1 6

Amount of Each Disbursement this Period

1 5 0 0 0

C. Wells Fargo

Mailing Address

City State Zip Code

Purpose of Disbursement
 Bank fee

Candidate Name

0 0 1
 Category/
 Type

Office Sought: ☐ House
☐ Senate
☐ President
 State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

0 6 / 1 5 / 2 0 1 6

Amount of Each Disbursement this Period

3 5 0 0

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

4101022000001022400

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 6

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Make Your Laws PAC, Inc. (MYL PAC)

Full Name (Last, First, Middle Initial)

A. Tabs Outliner

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Software

Candidate Name

0 0 1

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY
0 6 / 2 7 / 2 0 1 6

Amount of Each Disbursement this Period

1 4 9 5

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

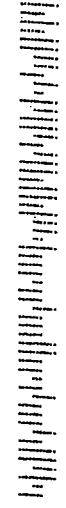
SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

5 0 8 1 9

2016 JUL 20 10:10 AM

CERTIFIED MAIL



7015 0640 0003 2302 5561

Make Your Laws PAC, Inc.
500 Westover Dr #8458
Sanford, North Carolina 27330
United States

LOB-160714-075 - 000000001
Federal Election Commission
999 E St NW
Washington, DC 20463-0001
United States



U.S. POSTAGE PITNEY BOW
ZIP 60053 \$ 005.29
02 1W
0001402197 JUL 15 201

RECEIVED
FEC MAIL CENTER
2016 JUL 20 AM 10:1

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

☐ Hand Delivered Date of Receipt

☐ USPS First Class Mail Postmarked Date of Receipt

☒ USPS Registered/Certified Postmarked (R/C)
7/15/2016

☐ USPS Priority Mail Postmarked

☐ USPS Priority Mail Express Postmarked

☐ Postmark Illegible

☐ No Postmark

☐ Overnight Delivery Service (Specify): Shipping Date
Next Business Day Delivery ☐

☐ Received from House Records & Registration Office Date of Receipt

☐ Received from Senate Public Records Office Date of Receipt

☐ Received from Electronic Filing Office Date of Receipt

☐ Other (Specify): Date of Receipt or Postmarked

PREPARER

MP

7/20/2016
DATE PREPARED

(3/2015)

2016-07-20 10:00:00